

IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

21. Mineral Ownership: Fee State Federal Indian Lease #: _____
22. Surface Ownership: Fee State Federal Indian
23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#: _____
23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? Yes No
23b. If 23 is No: Surface Owners Agreement Attached or \$25,000 Blanket Surface Bond \$2,000 Surface Bond \$5,000 Surface Bond
24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
SEE ATTACHED DESCRIPTION
25. Distance to Nearest Mineral Lease Line: 56 ft 26. Total Acres in Lease: 5879

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? Yes No If Yes, attach contingency plan.
28. Will salt sections be encountered during drilling? Yes No
29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? Yes No
30. If questions 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No
31. Mud disposal: Offsite Onsite **If 28, 29, or 30 are "Yes" a pit permit may be required.**
Method: Land Farming Land Spreading Disposal Facility Other: _____
Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	24	0	686	290	686	0
1ST	7+7/8	4+1/2	11.6	0	8,006	385	8,006	6,310
			Stage Tool		5,486	420	5,486	3,700

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None
33. Comments THIS RECOMPLETION DOES NOT REQUIRE A FORM 2A AS NO PITS WILL BE CONSTRUCTED AND THERE WILL BE NO ADDITIONAL SURFACE DISTURBANCE BEYOND THE ORIGINALLY DISTURBED AREA. RECOMPLETION FORM 4 DOC #2586942.

34. Location ID: 332623
35. Is this application in a Comprehensive Drilling Plan ? Yes No
36. Is this application part of submitted Oil and Gas Location Assessment ? Yes No
I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: _____ Print Name: JENNIFER LIND
Title: REGULATORY Date: 6/29/2011 Email: JENNIFER.LIND@ENCANA.C

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Nashin Director of COGCC Date: 7/22/2011

API NUMBER
05 123 27291 00

Permit Number: _____ Expiration Date: 7/21/2013

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

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|---|
| 1)Provide 24 hour notice of MIRU to Bo Brown via e-mail at bo.brown@state.co.us. |
| 2)Within 30 days after recomplete, submit Form 5A to document new status of the formation in accordance with Rule 308B. |

Attachment Check List

Att Doc Num	Name
2481023	SURFACE CASING CHECK
2586944	APD ORIGINAL
2586945	OIL & GAS LEASE

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Data Entry	CHECK SEC TWP RNG FOR FOOTAGES AT TOP AND BOTTOM HOLE #15.	6/30/2011 3:08:39 PM

Total: 1 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)